



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

SFD 2205-0009

ROY COOPER • Governor  
KODY H. KINSLEY • Secretary  
HELEN WOLSTENHOLME • Interim Deputy Secretary for Health  
MARK T. BENTON • Assistant Secretary for Public Health  
Division of Public Health

**COMMON FORM FOR ENGINEERED OPTION PERMIT**  
*See Instructions for Use in Appendix A*

Except for "Date received", this Section to be completed by the Professional Engineer licensed in accordance with G.S. 89C

LHD USE ONLY: Initial submittal of this NOI received: 11-9-23 by MAO  
Date Initials

**PART 1: Notice of Intent to Construct (NOI) - Please check all that apply**

Single System or  Multiple Systems

AND

New  Expansion  Relocation of all or part of the Existing System  Relocation of Repair Area

Repair – LHD Permit Number \_\_\_\_\_  Repair – EOP/LSS COVID 19/AOWE Permit Number \_\_\_\_\_

1. Facility Owner's name: (Owner, Company Name, Utility, Partnership, Individual, etc.): Adams Homes AEC, LLC.

Mailing address: 140 US Hwy 70 West City: Garner State: NC Zip: 27529

Telephone number: 919-233-6747 E-mail Address: raleighpermits@adamshomes.com

2. Professional Engineer (PE) name: John G. Thomas License number: 010147

Mailing address: P.O. Box 1309 City: New Bern State: NC Zip: 28563

Telephone number: 252-637-2727 E-mail Address: johnthomas@thomasengineeringpa.com

3. Licensed Soil Scientist (LSS) name: R. Haywood Pittman II License number: 1262

Mailing address: 1073-1 Gregory Fork Road City: Richlands State: NC Zip: 28574

Telephone number: 910-324-2892 E-mail Address: pittmansoil@yahoo.com

4. Licensed Geologist (LG) (if applicable) name: \_\_\_\_\_ License number: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

5. On-Site Wastewater Contractor name: Thornton's Footings, Hauling & Septic, INC. License number: 2534

Mailing address: 3160A Vinson Road City: Clayton State: NC Zip: 27527

Telephone number: 919-550-4833 E-mail Address: thorntonshr@embarqmail.com

6. Proof of Errors and Omissions or other appropriate liability insurance for the following persons is attached that includes the name of the insurer, name of the insured and the effective dates of coverage:

PE  LSS  LG  On-site Wastewater Contractor

**NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH**

LOCATION: 5605 Six Forks Road, Raleigh, NC 27609  
MAILING ADDRESS: 1642 Mail Service Center, Raleigh, NC 27699-1642  
www.ncdhhs.gov • TEL: 919-707-5874 • FAX: 919-845-3972

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

- 7. Property location (physical address, tax parcel identification number or subdivision lot, block number of the property to be permitted): 361 Ponderosa Trail; PARID: 9567-30-2261; Lot 12; Carolina Seasons Subdivision  
County Name: Harnett
- 8. Type of facility:  Place of residence No. Bedrooms: 3 No. Occupants: 6  
Place of business  Basis for flow calculation: \_\_\_\_\_  
 Place of public assembly Basis for flow calculation: \_\_\_\_\_
- 9. Factors that would affect the wastewater load: N/A
- 10. Type and location of proposed wastewater system: Type III Horizontal Panel Block Septic System, Located left side of lot as viewed from the street.
- 11. Design wastewater flow: 360 gpd (For flow > 3,000 gpd and industrial process, duplicate plans shall be sent to the State.)  
  high strength  industrial process
- 12. A plat as defined in G.S. 130A-334(7a) is attached:  Yes  No
- 13. Location of proposed or existing wells (drinking water, irrigation, geothermal, groundwater monitoring, sampling, etc.) and any potable and non-potable water conveyance lines is indicated on attached plans and complies with 15A NCAC 18A .1950:  Yes  No  
This is a saporlite system.  Yes  No
- 14. Evaluation(s) of soil conditions and site features in accordance with G.S. 130A-335(a1) signed and sealed by a LSS is attached:  Yes  No
- 15. Evaluation of geologic and hydrogeologic conditions signed and sealed by a LG is attached  Yes  NA
- 16. Proposed landscape, site, drainage, or soil modifications are attached:  Yes  NA

**Attestation by Professional Engineer licensed in North Carolina pursuant to G.S. 89C**

I, John G. Thomas, PE  
*Registered Professional Engineer (Print Name)*  
attest that the information required to be included with this Notice of Intent to Construct is accurate and complete to the best of my knowledge and that the proposed system shall meet applicable federal, State and local laws, regulations, rules, and ordinances in accordance with G.S. 130A-336-.1(e)(6).



10/27/2023

Date

*This section for Local Health Department use only.*

**PART 2: LHD Completeness Review of the Notice of Intent to Construct**

"(c) *Completeness Review for Notice of Intent to Construct.* – The local health department shall determine whether a notice of intent to construct, as required pursuant subsection (b) of this section, is complete within 15 business days after the local health department receives the notice of intent to construct. A determination of completeness means that the notice of intent to construct includes all of the required components. If the local health department determines that the notice of intent to construct is incomplete, the department shall notify the owner or the professional engineer of the components needed to complete the notice. The owner or professional engineer may submit additional information to the department to cure the deficiencies in the notice. The local health department shall make a final determination as to whether the notice of intent to construct is complete within 10 business days after the department receives the additional information from the owner or professional engineer. If the department fails to act within any time period set out in this subsection, the owner or professional engineer may treat the failure to act as a determination of completeness."

The review for completeness of this Notice of Intent was conducted in accordance with G.S. 130A-336.1(c). This NOI is determined to be:

INCOMPLETE (If box is checked, Information in this section is required.)

Based upon review of information submitted in Part 1, the following items are missing: \_\_\_\_\_

Copies of this form listing missing items were sent to the design PE and the Owner on \_\_\_\_\_  
Date

via \_\_\_\_\_ with directions to re-submit missing items using Page 5 of this form.  
Email, FAX, USPS, hand-delivered

\_\_\_\_\_  
Print Name of Authorized Agent of the LHD      Signature of Authorized Agent of the LHD      Date

COMPLETE (If box is checked, information in this section is required.)

Based upon review of information submitted in Part 1 of this form, this NOI is deemed COMPLETE.

Copies of this signed form were sent to the design PE and the Owner on 11-15-23 via Email.  
Date      Email, FAX, USPS, hand-delivered

A copy of this NOI and tracking information was sent to the State on 11-15-23 via Email.  
Date      Email, FAX, USPS, hand-delivered

Mark Osborne      [Signature]      11-15-23  
Print Name of Authorized Agent of the LHD      Signature of Authorized Agent of the LHD      Date





NORTH CAROLINA FARM BUREAU MUTUAL INSURANCE COMPANY, INC.

**CERTIFICATE OF LIABILITY INSURANCE**

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

INSURED NAME AND ADDRESS  
 RONALD HAYWOOD PITTMAN II  
 DBA PITTMAN'S SOIL CONSULTING  
 1003 GREGORY FORK RD  
 RICHLANDS NC 28574

CERTIFICATE HOLDER  
 THOMAS ENGINEERING PA  
 1316-B COMMERCE DR  
 NEW BERN NC 28562

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

X	TYPE OF INSURANCE	ADDL INSP	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY - OCCURRENCE  GEN'L AGGREGATE APPLIES PER POLICY						GENERAL AGGREGATE	\$
							PRODUCTS - COMP/OPS AGGREGATE	\$
							PERSONAL & ADV INJURY	\$
							EACH OCCURRENCE	\$
							DAMAGE TO RENTED PREMISES (Ea Occurrence)	\$
							MED EXP (Any one person)	\$
<input type="checkbox"/>	BUSINESSOWNERS						EACH OCCURRENCE	\$
							AGGREGATE	\$
<input checked="" type="checkbox"/>	AUTOMOBILE LIABILITY			BAP 2134903	7/14/2023	1/14/2024	COMBINED SINGLE LIMIT (Each accident)	\$1,000,000
<input checked="" type="checkbox"/>	SCHEDULED AUTOS						BODILY INJURY (Per person)	\$
<input type="checkbox"/>	HIRED AUTOS						BODILY INJURY (Per accident)	\$
<input type="checkbox"/>	NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$
<input type="checkbox"/>	GARAGE LIABILITY							
<input type="checkbox"/>	(Other)							
<input type="checkbox"/>	EXCESS LIABILITY - OCCURRENCE						EACH OCCURRENCE	\$
							AGGREGATE	\$
<input checked="" type="checkbox"/>	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  POLICY APPLIES TO THE WORKERS COMPENSATION LAW IN THE STATE OF NC	N/A		WC 0243634	10/6/2022	10/6/2023	WC STATUTORY LIMITS	
							E.L. EACH ACCIDENT	\$500,000
							E.L. DISEASE - EA EMPLOYEE	\$500,000
							E.L. DISEASE - POLICY LIMIT	\$500,000
<input type="checkbox"/>	OTHER:							

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES:

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

TW

DATE 7/27/2023

*Inya Woodard*



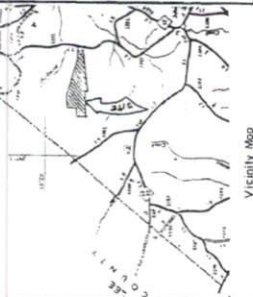
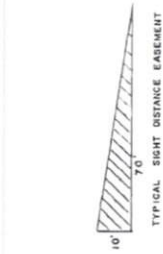


# FINAL PLAT OF CAROLINA SEASONS

## Section One

JOHNSONVILLE TWP,  
HARNETT CO., N.C.  
SCALE = 1" = 200'  
October 11, 1990

PL# Slide 85-C

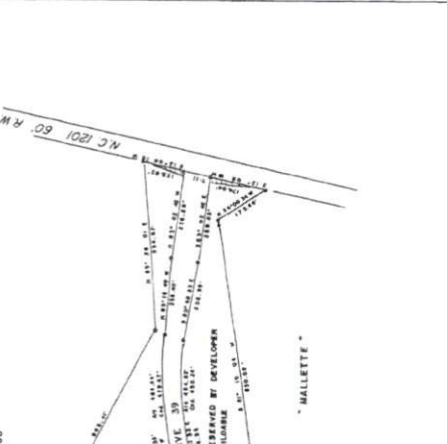
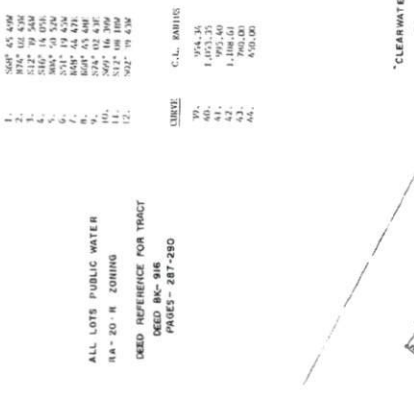


I, ROBERT J. BRACKEN, CERTIFY THAT I HAVE EXAMINED THE MAP AND SUPERVISOR'S REPORT AND HAVE CONSENTED TO THE PLATING OF THIS MAP AND DEPARTURES THEREFROM AND THAT THE MAP AND DEPARTURES THEREFROM ARE TRUE AND CORRECT AND THAT THE MAP AND DEPARTURES THEREFROM WILL BE AS SHOWN AND APPROVED IN ACCORDANCE WITH GS 170-30 AS AMENDED.

Approved: *Robert J. Bracken*  
Robert J. Bracken, Esq.  
Attorney at Law

TRACT	ACREAGE	DEED REFERENCE FOR TRACT
A-1	0.39 AC.	DEED BK-916
A-2	0.65 AC.	PRICES-287-280
A-3	1.46 AC.	
A-4	0.46 AC.	
A-5	0.46 AC.	
A-6	0.46 AC.	
A-7	0.46 AC.	
A-8	0.46 AC.	
A-9	0.46 AC.	
A-10	0.46 AC.	
A-11	0.46 AC.	
A-12	0.46 AC.	
A-13	0.46 AC.	
A-14	0.47 AC.	
A-15	0.47 AC.	
A-16	0.47 AC.	
A-17	0.47 AC.	
A-18	0.47 AC.	
A-19	0.88 AC.	

LINE	BEARING	DISTANCE	AREA	CUYD
1	S 89° 52' 30" W	127.77	1021.35	153.19
2	S 87° 52' 30" W	127.77	1021.35	153.19
3	S 85° 52' 30" W	127.77	1021.35	153.19
4	S 83° 52' 30" W	127.77	1021.35	153.19
5	S 81° 52' 30" W	127.77	1021.35	153.19
6	S 79° 52' 30" W	127.77	1021.35	153.19
7	S 77° 52' 30" W	127.77	1021.35	153.19
8	S 75° 52' 30" W	127.77	1021.35	153.19
9	S 73° 52' 30" W	127.77	1021.35	153.19
10	S 71° 52' 30" W	127.77	1021.35	153.19
11	S 69° 52' 30" W	127.77	1021.35	153.19
12	S 67° 52' 30" W	127.77	1021.35	153.19
13	S 65° 52' 30" W	127.77	1021.35	153.19
14	S 63° 52' 30" W	127.77	1021.35	153.19
15	S 61° 52' 30" W	127.77	1021.35	153.19
16	S 59° 52' 30" W	127.77	1021.35	153.19
17	S 57° 52' 30" W	127.77	1021.35	153.19
18	S 55° 52' 30" W	127.77	1021.35	153.19
19	S 53° 52' 30" W	127.77	1021.35	153.19
20	S 51° 52' 30" W	127.77	1021.35	153.19
21	S 49° 52' 30" W	127.77	1021.35	153.19
22	S 47° 52' 30" W	127.77	1021.35	153.19
23	S 45° 52' 30" W	127.77	1021.35	153.19
24	S 43° 52' 30" W	127.77	1021.35	153.19
25	S 41° 52' 30" W	127.77	1021.35	153.19
26	S 39° 52' 30" W	127.77	1021.35	153.19
27	S 37° 52' 30" W	127.77	1021.35	153.19
28	S 35° 52' 30" W	127.77	1021.35	153.19
29	S 33° 52' 30" W	127.77	1021.35	153.19
30	S 31° 52' 30" W	127.77	1021.35	153.19
31	S 29° 52' 30" W	127.77	1021.35	153.19
32	S 27° 52' 30" W	127.77	1021.35	153.19
33	S 25° 52' 30" W	127.77	1021.35	153.19
34	S 23° 52' 30" W	127.77	1021.35	153.19
35	S 21° 52' 30" W	127.77	1021.35	153.19
36	S 19° 52' 30" W	127.77	1021.35	153.19
37	S 17° 52' 30" W	127.77	1021.35	153.19
38	S 15° 52' 30" W	127.77	1021.35	153.19
39	S 13° 52' 30" W	127.77	1021.35	153.19
40	S 11° 52' 30" W	127.77	1021.35	153.19
41	S 9° 52' 30" W	127.77	1021.35	153.19
42	S 7° 52' 30" W	127.77	1021.35	153.19
43	S 5° 52' 30" W	127.77	1021.35	153.19
44	S 3° 52' 30" W	127.77	1021.35	153.19
45	S 1° 52' 30" W	127.77	1021.35	153.19
46	S 0° 52' 30" W	127.77	1021.35	153.19



BRACKEN & ASSOCIATES "P.A."  
ENGINEERS & SURVEYORS  
1100 WOODLAND AVE.  
SANFORD, N.C. 27330

DEVELOPER  
CAROLINA SEASONS  
VAN GROCE  
PO Box 2825  
SANFORD, N.C.

12 DEC 79  
Michael D. Ecker

12 DEC 79  
Michael D. Ecker





- LEGEND**
- AC=AIR CONDITIONING UNIT
  - BOC=BACK OF CURB
  - DW=CONC DRIVEWAY
  - EB=ELECTRIC BOX
  - EOP=EDGE OF PAVEMENT
  - P=PATIO
  - PO=PORCH
  - SCC=CLEANOUT
  - SW=SIDEWALK
  - TP=TELEPHONE PEDESTAL
  - WM=WATER METER
  - IRON PIPE FOUND
  - IRON PIPE SET
  - NAIL SET



THIS EXHIBIT MAP IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.

DB FLOYD, PLS L-3640      DATE

THIS MAP IS ONLY INTENDED FOR THE PARTIES AND PURPOSES SHOWN. THIS MAP IS NOT FOR RECORDATION. NO TITLE REPORT PROVIDED.

THIS MAP MAY NOT BE A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS AND HAS NOT BEEN REVIEWED FOR COMPLIANCE WITH RECORDING REQUIREMENTS FOR PLATS.

- GENERAL NOTES:**
1. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES IN U.S. SURVEY FEET UNLESS OTHERWISE NOTED.
  2. AREAS SHOWN HEREON WERE COMPUTED USING THE COORDINATE METHOD.
  3. LINES NOT SURVEYED ARE SHOWN AS DASHED LINES FROM INFORMATION REFERENCED ON THE FACE OF THIS SURVEY.
  4. PROPERTY MAY BE SUBJECT TO ANY/ALL EASEMENTS AND RESTRICTIONS OF RECORD. THIS SURVEY IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND OR DEEDED AND HAS BEEN PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT. A NORTH CAROLINA LICENSED ATTORNEY-AT-LAW SHOULD BE CONSULTED REGARDING CORRECT OWNERSHIP, WIDTH AND LOCATION OF EASEMENTS, AND OTHER TITLE QUESTIONS REVEALED BY TITLE EXAMINATION.
  5. DRIVEWAY IMPERVIOUS CALCULATION SHOWN HEREON CALCULATED TO THE FRONT PROPERTY LINE/RIGHT-OF-WAY.
  6. THIS PARCEL IS NOT LOCATED WITHIN A FLOOD HAZARD ZONE AS INDICATED ON CID NO. 370328 PANEL 9546, SUFFIX L HARNETT COUNTY WITH AN EFFECTIVE DATE OF 10/17/2006.

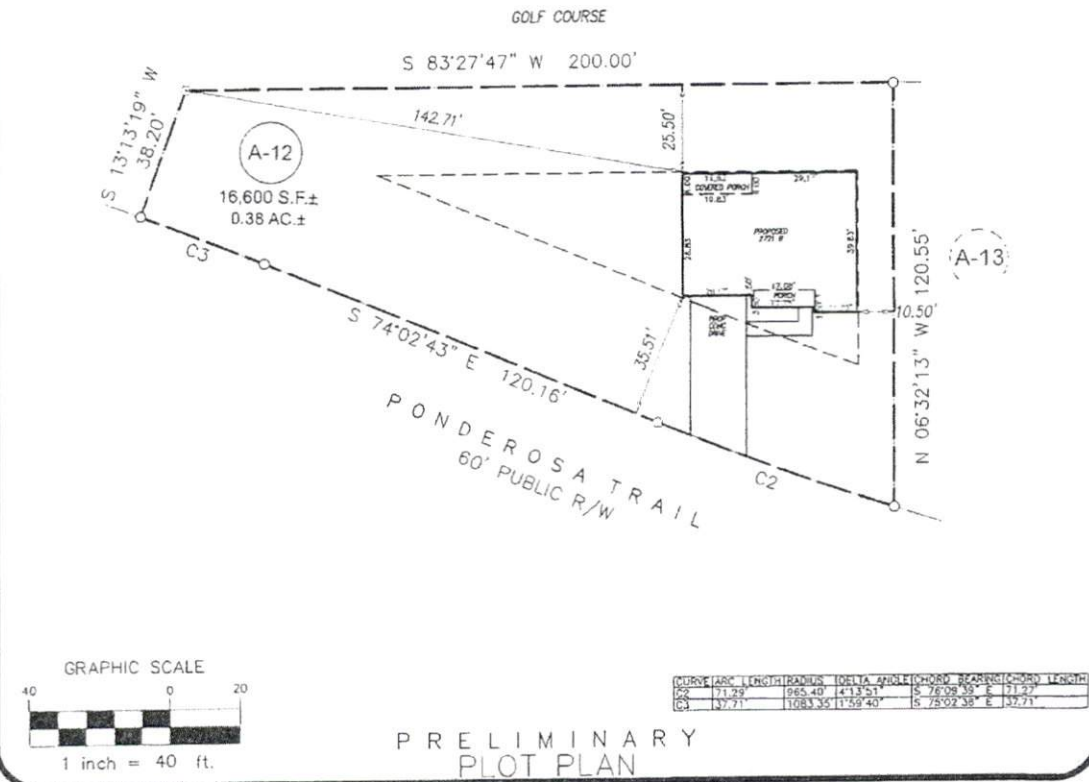
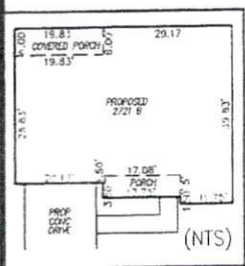
VICINITY MAP (NTS)

SETBACKS PER  
P.C.E. PG 85-C

- FRONT      35'
- SIDE        10'
- REAR       25'

**IMPERVIOUS AREA**

HOUSE	1,828 SQ.FT.
DRIVE TO R/W	679 SQ.FT.
WALK	90 SQ.FT.
<b>TOTAL</b>	<b>2,597 SQ.FT.</b>



**STAGE**

PROJECT:	2023 CAROLINA SEASONS
DRAWN BY:	SEER
SCALE:	1"=40'
DATE:	07-12-2023

FOR  
**ADAMS RALEIGH**  
361 PONDEROSA TRAIL  
LOT A-12 CAROLINA SEASONS SUBDIVISION  
JOHNSONVILLE TWP., HARNETT CO., NC  
P.C.E., PG. 85-C

**ECLS GLOBAL**  
U.S. VETERAN-OWNED  
19 N HICKINLEY ST  
CDATS, NC 27521  
910.897.3257 (KELSGLOBAL.COM)  
910.897.2329 (FAX) CO#C-1173



# *Pittman Soil Consulting*

*1003 Gregory Fork Road  
Richlands, NC 28574  
Phone (910)330-2784  
pittmansoil@yahoo.com*

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NOVEMBER 3, 2023

Ref: CAROLINA SEASONS LOT A-12, 361 PONDEROSA TRAIL

A soil evaluation was conducted on the above referenced tract to determine the sites suitability for septic. The current laws and rules of NC was used as guide for this evaluation.

Hand Auger borings on the site were used to characterize the soil texture, structure, physical and chemical properties, and depth to the soil wetness condition. The attached plot plan shows the location of the septic system in the most ideal location on the site. The soil wetness condition was found to be 26-30" from the surface with a clay loam texture. I have assigned an LTAR of 0.4 gpd/sqft for a 360 gpd 3 bedroom residence. This will require the installation of 3-50' horizontal panel block lines that shall be installed in accordance with the current rules. The depth to soil wetness of 26-30" would constitute a 14-18" trench bottom. The system will require 6" of Group II or III soil cover that shall extend 5' from the edge of the system. The system will require a 1000 gallon septic tank.

Soils in the repair area showed soil wetness at depths of 16" from the surface with a clay loam texture. The repair area will require 1800 SQFT anaerobic drip installed at 4" from the surface with an LTAR of 0.2 gpd/sqft.

After installation the site should be landscaped to shed surface water. Any alterations to the site may impact soil conditions. System shall not be installed in wet conditions.

If you have any questions please feel free to contact me at 910-330-2784. Thank You.

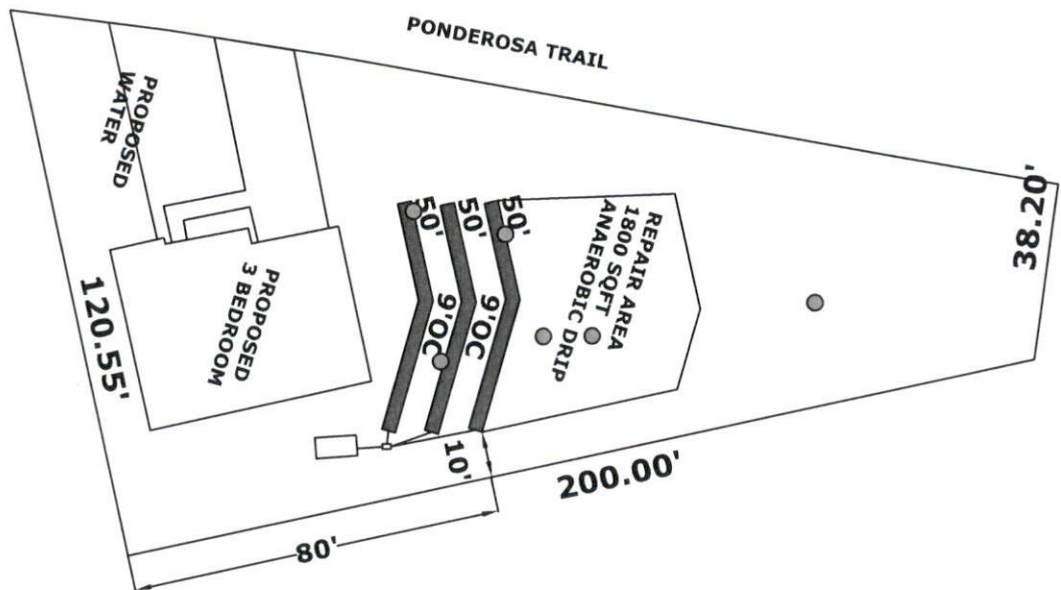
Sincerely,



R. Haywood Pittman II  
NC Licensed Soil Scientist

Owner: CAROLINA SEASONS  
Address: LOT A-12  
Location: 361 PONDEROSA TRAIL

PITTMAN SOIL CONSULTING  
PO BOX 1387  
RICHLANDS, NC 28574  
910-330-2784  
pittmansoil@yahoo.com



**INITIAL**  
3 BEDROOM  
LTAR 0.4  
3-50' HORIZONTAL PANEL BLOCK LINES  
14-18" TRENCH BOTTOMS  
>6" SOIL COVER REQUIRED OVER  
SYSTEM AND 5' BEYOND SYSTEM

**REPAIR AREA**  
3 BEDROOM  
LTAR .2  
1800 DQFT ANAEROBIC DRIP  
4" TRENCH BOTTOMS  
>6" SOIL COVER REQUIRED OVER  
SYSTEM AND 5' BEYOND SYSTEM

APPROX SCALE 1"=40'